B1 (Official Form 1)(04/13)	United S			ruptcy f Florida					Vol	untary Petition	— n
Name of Debtor (if individual, Holland, Dean Mitchell	enter Last, First,			1101101	_	of Joint De	ebtor (Spouse)	) (Last, First	, Middle):		
All Other Names used by the E (include married, maiden, and t		3 years					used by the J maiden, and			3 years	
Last four digits of Soc. Sec. or (if more than one, state all)  xxx-xx-4883	Individual-Taxpa	yer I.D. (I	TIN)/Com	plete EIN	Last fo	our digits o	f Soc. Sec. or	Individual-	Гахрауег I.	D. (ITIN) No./Complete	EIN
Street Address of Debtor (No. a 7147 Yacht Basin Ave		nd State):			Street	Address of	Joint Debtor	(No. and Str	reet, City, a	and State):	
Orlando, FL				ZIP Code 32835	_					ZIP Cod	le
County of Residence or of the Dorange	Principal Place of	Business:		32033	Count	y of Reside	ence or of the	Principal Pla	ace of Busi	ness:	
Mailing Address of Debtor (if	different from stre	et address	s):		Mailin	g Address	of Joint Debte	or (if differen	nt from stre	eet address):	
			_	ZIP Code						ZIP Cod	de
Location of Principal Assets of (if different from street address	Business Debtor above):										
Type of Debto				of Business			Chapter	of Bankrup	otcy Code	Under Which	
(Form of Organization) (Ch  Individual (includes Joint □  See Exhibit D on page 2 of this  □ Corporation (includes LLC  □ Partnership  □ Other (If debtor is not one of the check this box and state type of the check this box and the check this box an	Debtors)  form.  and LLP)  the above entities,	Singl in 11 Railre Stock Comm	th Care Bu le Asset Re U.S.C. § 1 oad cbroker modity Bro ring Bank	eal Estate as 101 (51B)	defined	☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt	er 7 er 9 er 11 er 12	of □ Cl	hapter 15 F a Foreign hapter 15 F	Petition for Recognition Main Proceeding Petition for Recognition Nonmain Proceeding	
Chapter 15 Debt Country of debtor's center of main Each country in which a foreign proby, regarding, or against debtor is	interests:	Debto under	Tax-Exe (Check box or is a tax-ex Title 26 of	mpt Entity , if applicable empt organizathe United State I Revenue Coo	ation ates	defined "incurr	are primarily co I in 11 U.S.C. § red by an indivi- nal, family, or l	(Check insumer debts, 101(8) as dual primarily	for	Debts are primarily business debts.	
Filing Fee Full Filing Fee attached Filing Fee to be paid in installn attach signed application for th debtor is unable to pay fee exce Form 3A. Filing Fee waiver requested (agattach signed application for the	e court's considerati ept in installments. I oplicable to chapter	individuals on certifyin Rule 1006(b 7 individual	g that the b). See Offic ls only). Mu	ial Check i  Check i  Check a  Check a  Check a  Check a  Check a	ebtor is not f: lebtor's aggi- re less than s all applicable plan is bein acceptances	a small busing regate nonco \$2,490,925 (each boxes: any filed with of the plan w	debtor as defin ness debtor as d ntingent liquida amount subject this petition.	lefined in 11 United debts (exc to adjustment	C. § 101(511 J.S.C. § 101 cluding debts on 4/01/16		
Statistical/Administrative Inf  ■ Debtor estimates that funds □ Debtor estimates that, after there will be no funds avail	will be available any exempt prope	erty is exc	luded and	administrati		es paid,		THIS	SPACE IS	FOR COURT USE ONLY	
Estimated Number of Creditors	□ I 200-	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000				
Estimated Assets  SO to \$50,001 to \$100,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500,000 \$500	01 to \$500,001 00 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion					
Estimated Liabilities	01 to \$500,001 00 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion					

Case 6:14-bk-13275-ABB Doc 1 Filed 12/05/14 Page 2 of 56

DI (Official For	m 1)(04/13)		1 age 2		
Voluntar	•	Name of Debtor(s): Holland, Dean Mitchell			
(This page mu	st be completed and filed in every case)	9 V (If 4) 4			
Location	All Prior Bankruptcy Cases Filed Within Last	Case Number:	Date Filed:		
Where Filed:	- None -				
Location Where Filed:		Case Number:	Date Filed:		
	nding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more than	one, attach additional sheet)		
Name of Debte - None -	or:	Case Number:	Date Filed:		
District:		Relationship:	Judge:		
	Exhibit A		hibit B		
forms 10K at pursuant to S	eleted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 sting relief under chapter 11.)	(To be completed if debtor is an individual whose debts are primarily consumer debts.)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).			
☐ Exhibit	A is attached and made a part of this petition.	X /s/ David L. Robold, Esq.	December 5, 2014		
		Signature of Attorney for Debtor(s)  David L. Robold, Esq.	(Date)		
	Exh	ibit C			
Does the debto	or own or have possession of any property that poses or is alleged to	pose a threat of imminent and identifiable	harm to public health or safety?		
☐ Yes, and ☐ No.	Exhibit C is attached and made a part of this petition.				
		ibit D			
_	leted by every individual debtor. If a joint petition is filed, ea D completed and signed by the debtor is attached and made and nt petition:	-	. separate Exhibit D.)		
☐ Exhibit	D also completed and signed by the joint debtor is attached a	and made a part of this petition.			
	Information Regarding	=			
•	(Check any ap Debtor has been domiciled or has had a residence, principe days immediately preceding the data of this patition or for	al place of business, or principal asset			
days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.  There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.					
	Debtor is a debtor in a foreign proceeding and has its princ this District, or has no principal place of business or assets proceeding [in a federal or state court] in this District, or the sought in this District.	in the United States but is a defendar	nt in an action or		
	Certification by a Debtor Who Reside (Check all app		ty		
	Landlord has a judgment against the debtor for possession	of debtor's residence. (If box checked,	complete the following.)		
	(Name of landlord that obtained judgment)				
	(Address of landlord)				
	Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment to				
	Debtor has included with this petition the deposit with the after the filing of the petition.	court of any rent that would become	due during the 30-day period		
	Debtor certifies that he/she has served the Landlord with the	nis certification. (11 U.S.C. § 362(1)).			

B1 (Official Form 1)(04/13) Page 3

## **Voluntary Petition**

(This page must be completed and filed in every case)

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

### X /s/ Dean Mitchell Holland

Signature of Debtor Dean Mitchell Holland

 $\mathbf{X}$ 

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

December 5, 2014

Date

### Signature of Attorney\*

### X /s/ David L. Robold, Esq.

Signature of Attorney for Debtor(s)

#### David L. Robold, Esq. #083542

Printed Name of Attorney for Debtor(s)

#### Roberts & Robold, P.A.

Firm Name

131 Park Lake Street Orlando, FL 32803

Address

## Email: bankruptcy@roberts-robold.com 407-426-6999 Fax: 407-872-2266

Telephone Number

### December 5, 2014

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

### $Signature\ of\ Debtor\ (Corporation/Partnership)$

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s):

Holland, Dean Mitchell

#### **Signatures**

#### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

<b>T</b> 7
X
Z3

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

<b>T</b>
v

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

## United States Bankruptcy Court Middle District of Florida

In re	Dean Mitchell Holland	ell Holland		
		Debtor(s)	Chapter	13

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	ge 2
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);  ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone,	
through the Internet.);	
☐ Active military duty in a military combat zone.	
□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling equirement of 11 U.S.C. § 109(h) does not apply in this district.	
I certify under penalty of perjury that the information provided above is true and correct.	
Signature of Debtor: /s/ Dean Mitchell Holland  Dean Mitchell Holland	
Date: December 5, 2014	

B6 Summary (Official Form 6 - Summary) (12/14)

## United States Bankruptcy Court Middle District of Florida

In re Do	Dean Mitchell Holland		Case No.	
		Debtor ,		
			Chapter	13

### SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	4	10,064.51		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		706,735.92	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	13		291,336.18	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			3,500.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			3,480.00
Total Number of Sheets of ALL Schedu	ıles	28			
	T	otal Assets	10,064.51		
			Total Liabilities	998,072.10	

B 6 Summary (Official Form 6 - Summary) (12/14)

## United States Bankruptcy Court Middle District of Florida

In re	Dean Mitchell Holland		Case No.	
•		Debtor		
			Chapter	13

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	706,735.92
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	706,735.92

#### State the following:

Average Income (from Schedule I, Line 12)	3,500.00
Average Expenses (from Schedule J, Line 22)	3,480.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	3,500.00

#### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	82,042.12	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		291,336.18
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		291,336.18

### Case 6:14-bk-13275-ABB Doc 1 Filed 12/05/14 Page 8 of 56

B6A (Official Form 6A) (12/07)

In re	Dean Mitchell Holland	Case No
-		Debtor

### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Wife, Joint, or Community

Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00** 

(Report also on Summary of Schedules)

B6B (Official Form 6B) (12/07)

In re	Dean Mitchell Holland	Case No.
-		Debtor

### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Type of Property		Type of Property  N O N Description and Location of Property E		Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption	
1.	Cash on hand	X				
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		BMO Harris Checking Account No. 7230	-	6,429.51	
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X				
4.	Household goods and furnishings, including audio, video, and computer equipment.		kitchen-toaster over, coffee maker, various cooking utensils, table with (6) chairs, misc. kitchen appliances, couch, coffee table, misc. lamps, tv, bed, dresser, end table, old computer	-	1,500.00	
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		misc. books and magazines	-	25.00	
6.	Wearing apparel.		clothing	-	200.00	
7.	Furs and jewelry.	X				
8.	Firearms and sports, photographic, and other hobby equipment.	X				
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X				
10.	Annuities. Itemize and name each issuer.	X				
				Sub-Tota of this page)	al > <b>8,154.51</b>	

**3** continuation sheets attached to the Schedule of Personal Property

In re	Dean Mitchell Holland	Case No.	
		·	

Debtor

## SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	х			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	x			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
			(To	Sub-Tota of this page)	al > <b>0.00</b>

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

In re	Dean Mitchell Holland	Case No.

Debtor

## **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	1 N	994 Ford F150 (XL) extended cab 2dr Mileage: 240,000	-	550.00
			983 Kawasaki 1100 Mileage: 10,000	-	860.00
		N	Not running.		
		N	993 Honda Del Sol Mileage: 100,000 daughter drives	-	500.00
			Poor condition; Significant body and paint damage lamage.		
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			

Sub-Total > 1,910.00 (Total of this page)

Sheet **2** of **3** continuation sheets attached to the Schedule of Personal Property

## Case 6:14-bk-13275-ABB Doc 1 Filed 12/05/14 Page 12 of 56

B6B (Official Form 6B) (12/07) - Cont.

In re	Dean Mitchell Holland	Case No.	
_		Debtor	

## **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			

| Sub-Total > | 0.00 | | (Total of this page) | Total > | 10,064.51 |

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

B6C (Official Form 6C) (4/13)

In re	Dean Mitchell Holland	Case No.	

Debtor

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT						
Debtor claims the exemptions to which debtor is entitled u (Check one box)  ☐ 11 U.S.C. §522(b)(2)  ☐ 11 U.S.C. §522(b)(3)	\$155,675. (Am	or claims a homestead exe ount subject to adjustment on 4/1 h respect to cases commenced on	/16, and every three years thereaft			
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption			
Checking, Savings, or Other Financial Accounts, C BMO Harris Checking Account No. 7230	ertificates of Deposit Fla. Stat. Ann. § 222.11(2)(b)	6,429.51	6,429.51			
Household Goods and Furnishings kitchen-toaster over, coffee maker, various cooking utensils, table with (6) chairs, misc. kitchen appliances, couch, coffee table, misc. lamps, tv, bed, dresser, end table, old computer	Fla. Const. art. X, § 4(a)(2) Fla. Stat. Ann. § 222.25(4)	1,000.00 500.00	1,500.00			
Books, Pictures and Other Art Objects; Collectibles misc. books and magazines	<u>s</u> Fla. Stat. Ann. § 222.25(4)	25.00	25.00			
Wearing Apparel clothing	Fla. Stat. Ann. § 222.25(4)	200.00	200.00			
<u>Automobiles, Trucks, Trailers, and Other Vehicles</u> 1994 Ford F150 (XL) extended cab 2dr Mileage: 240,000	Fla. Stat. Ann. § 222.25(1) Fla. Stat. Ann. § 222.25(4)	500.00 50.00	550.00			
1983 Kawasaki 1100 Mileage: 10,000	Fla. Stat. Ann. § 222.25(4)	860.00	860.00			
Not running.						
1993 Honda Del Sol Mileage: 100,000 daughter drives	Fla. Stat. Ann. § 222.25(4)	500.00	500.00			
Poor condition; Significant body and paint						

damage damage.

Total: 10,064.51 10,064.51 B6D (Official Form 6D) (12/07)

In re	Dean Mitchell Holland		Case No.	
-		Debtor		

### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors hold:	ıng	seci	ared claims to report on this Schedule D.					
CREDITOR'S NAME	C	Hu	sband, Wife, Joint, or Community	C	U N	D	AMOUNT OF	
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C A M	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	OM-IND-INZC	DISPUTED	CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.				Т	E			
			Value \$		D			
Account No.				П				
			Value \$					
Account No.								
			Value \$					
Account No.								
			Value \$					
continuation sheets attached			S (Total of th	ubte nis p				
			(Report on Summary of Sc		ota ule		0.00	0.00
			-					

B6E (Official Form 6E) (4/13)

•		
In re	Dean Mitchell Holland	Case No.
-		Debtor ,

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules. Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) ☐ Domestic support obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). ☐ Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). ☐ Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). ☐ Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). ☐ Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). ☐ Deposits by individuals Claims of individuals up to \$2,775\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). ■ Taxes and certain other debts owed to governmental units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). ☐ Commitments to maintain the capital of an insured depository institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). ☐ Claims for death or personal injury while debtor was intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

continuation sheets attached

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (4/13) - Cont.

In re	Dean Mitchell Holland			Case No.	
-		Debtor	_,		

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY UNLIQUIDATED CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) 1995-2009 Account No. Internal Revenue Service Unknown PO Box 660169 Dallas, TX 75266-0169  $\mathbf{x} | \mathbf{x} | \mathbf{x}$ 624,693.80 Unknown 2010 & 2011 Account No. **Orange County VA** 0.00 P.O. Box 469 Orange, VA 22960 100.00 100.00 1995-2009 Account No. Virginia Department of Taxat 0.00 PO Box 1115 Richmond, VA 23218 81,942.12 81,942.12 Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) 82,042.12 Schedule of Creditors Holding Unsecured Priority Claims 706,735.92 Total 0.00 (Report on Summary of Schedules) 706,735.92 82,042.12

B6F (Official Form 6F) (12/07)

In re	Dean Mitchell Holland	Case No.
		Debtor

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

Check this box if debtor has no creditors holding unsecu	rea c	таш	ns to report on this schedule F.					
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  Account No. 13-00817806693	C O D E B T O R	Hu H W J C		COXT_XGEXT	D A T	T E	U T E	AMOUNT OF CLAIM
Accent 7171 Mercy Rd Omaha, NE 68106		-	Medical		E D			214.25
Account No. 5584-1800-1510-8635  Advanta Bank Corp P.O. Box 8088 Philadelphia, PA 19101		-	Credit Card					20.69
Account No. 96AN14449964  Ameripath Florida, LLC 16684 Collections Center Dri Chicago, IL 60693		-	Medical					100.00
Account No. 5490-9962-9147-9546  Bank of America P.O. Box 982235 El Paso, TX 79998		-	Credit Card					5,874.78
			(Total of t	Subt			,	6,209.72

In re	Dean Mitchell Holland	Case No	
_		Debtor	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	Ü	P	,	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C 1 M H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	NL QU L DAT	DISPUTED	:	AMOUNT OF CLAIM
Account No. <b>4264-2877-6929-1994</b>	1		Credit Card		E			
Bank of America P.O Box 982235 El Paso, TX 79998		-			D			10,813.27
Account No.			Medical				T	
Beacon Health 2051 Hamill Rd #301 Hixson, TN 37343		-						271.73
	╀	_		ot	igspace	Ļ	+	
Account No. 2-47036-09386  Blockbuster PO Box 461028 Papillion, NE 68046	-	-						26.61
Account No. 375700960  Business Revenue Syste 2419 Spy Run Ave Ste A Fort Wayne, IN 46805		-	Opened 11/14/11 Last Active 5/01/11 Collection Attorney Medical Center Radio					197.00
Account No. 120008151270  Cach, Llc 4340 S Monaco St Unit 2 Denver, CO 80237		-	Opened 10/18/11 Last Active 3/01/11 Collection Attorney Bank Of America N.A					10,637.00
Sheet no1 of _12_ sheets attached to Schedule of				Subt	tota	ıl	T	21,945.61
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	re)	П	21,945.01

In re	Dean Mitchell Holland	Case No	
_		Debtor	

CDEDITOD'S NAME	Č	Hu	sband, Wife, Joint, or Community	Č	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONTLNGEN	UNLIQUIDA	I S P U T E D	AMOUNT OF CLAIM
Account No. 4791241897365438			Opened 4/02/01 Last Active 8/01/10	Π̈́	D A T E		
Cap One Po Box 85520 Richmond, VA 23285		-	Business Credit Card		D		5,806.00
Account No. HOLCE000	$^{+}$		Medical Debt				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Central Florida Behavioral Healthcare, PLLC 7350 Futures Drive Suite 16 Orlando, FL 32819		-					101.63
Account No. HOLCE000	╅		Medical Debt				
Central Florida Behavioral Healthcare, PLLC 7350 Futures Drive Suite 16 Orlando, FL 32819		-					101.63
Account No. <b>53093</b>	†	T	Medical Debt				
Central Virginia Oral and Facial 244 Hydraulic Ridge Road Charlottesville, VA 22901-8124		-					979.55
Account No. 1110890040	$\dagger$	$\vdash$	Opened 3/30/11 Last Active 12/01/10				
Charlottesville Bureau 3690 Dobleann Dr Charlottesville, VA 22911		-	Collection Attorney Dr. David G. Dalley				630.00
Sheet no. 2 of 12 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	f		(Total of	Sub			7,618.81

In re	Dean Mitchell Holland	Case No	
_		Debtor	

CDEDITORIS NAME	С	Hu	sband, Wife, Joint, or Community	С	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONTLNGEN	UNLLQULDAHE		AMOUNT OF CLAIM
Account No. 88206			Medical	T			
Charlottesville Gastero Assc 1139 E. High St #203 Charlottesville, VA 22902		-			D		25.00
Account No. <b>1640761341</b>	+		Opened 7/14/11 Collection Attorney Bright House Network				23.00
Credit Protection Asso 13355 Noel Rd Ste 2100 Dallas, TX 75240		-	, ,				
							363.00
Account No. 6011-0038-0793-7675  Discover Financial Services PO Box 153116  Wilmington, DE 19850		-	Credit Card				8,000.00
Account No. <b>3152400</b>	╁		Unpaid Toll Violation				,
Florida Department of Transp Violation Enforcement Sec PO Box 105477 Atlanta, GA 30348		-					94.00
Account No. <b>12161060000069515</b>	╁		Opened 5/13/11 Last Active 12/01/10	+			
Fredericksburg Cr Bur 10506 Wakeman Dr Fredericksburg, VA 22407		-	Collection Attorney Piedmont Emergency				5.00
Sheet no. <u>3</u> of <u>12</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	<u>.</u>		[ (Total of	Sub			8,487.00

In re	Dean Mitchell Holland	Case No.	
_		Debtor	

CDEDITOD'S NAME	С	Hu	sband, Wife, Joint, or Community	С	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J M H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONTINGEN	Ü	T E	AMOUNT OF CLAIM
Account No. 7981923471096802			Opened 12/23/02 Last Active 8/01/10	Τ̈́	E		
Gecrb/Lowes Po Box 965005 Orlando, FL 32896		-	Charge Account		D		1,020.00
Account No.	ł				<u> </u> 		1,020.00
Gillum Architects, P.C P.O. Box 830 Orange, VA 22960		-					
							50.00
Account No. A1113000371  Health Central 1000 W. Colonial Drive Ocoee, FL 34761		-	Medical				2,856.00
Account No. 119058  Health Central Ambulance PO Box 9109083 Orlando, FL 32891		-	Medical				727.00
Account No. 923	+		Consumer Debt				727.00
Jackson Hewitt 2221 Lee Road Oviedo, FL 32766		-					1,650.00
Sheet no. <u>4</u> of <u>12</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			[ (Total o	Sub			6,303.00

In re	Dean Mitchell Holland	Case No.	
_		Dehtor	

	1.		t two transfer of the contract	1~		_	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLIQUIDATE	DISPUTED	AMOUNT OF CLAIM
Account No. 4147202035750056			Opened 12/26/07 Last Active 10/01/10	Т	T E		
JP Morgan Chase Po Box 15298 Wilmington, DE 19850		-	Charge Account		D		9,579.00
Account No. <b>GV11-000446</b>							3,373.30
Keiter Stephans Hurst Gray 210 Ridge McIntire Rd Charlottesville, VA 22903		-					4,837.61
Account No.							4,837.61
Keiter Stephans Hurst Gray 210 Ridge McIntire Rd Charlottesville, VA 22903		-					9,949.86
Account No. <b>74984642</b>			Medical				,
Laboratory Corp of America P.O. Box 2240 Burlington, NC 27216		-					29.00
Account No. <b>46411120</b>	$\vdash$		Medical				
Laboratory Corp of America P.O. Box 2240 Burlington, NC 27216		-					14.38
Sheet no. <u>5</u> of <u>12</u> sheets attached to Schedule of				Sub			24,409.85
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	e)	2 ., .55.66

In re	Dean Mitchell Holland	Case No.	
_		Dehtor	

	С	Нп	sband, Wife, Joint, or Community	С	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	I N G E N	ONLIQUIDATE		AMOUNT OF CLAIM
Account No.				7	T E		
Maple Run Enterprises 109 Bearfield Amherst, VA 24521		-			D		1,029.33
Account No. <b>2012-137</b>	┞		Consumer Debt	+			1,020.00
Mara Roth 2813 Tangelo Drive Sarasota, FL 34239		-					500.00
Account No. <b>A1113000371MG</b>	┢		Medical				
Medical Center Radiology 20 W Kaley Street Orlando, FL 32806		-					197.00
Account No. <b>12128593</b>			Opened 1/01/12 Last Active 12/01/11				
Merchantscol 2066 14 Ave #102 Vero Beach, FL 32960		-	Government Secured Direct Loan Health Central				727.00
Account No. <b>8537390294</b>	L		Opened 11/24/10 Last Active 5/01/10	+			
Midland Funding 8875 Aero Dr Ste 200 San Diego, CA 92123		-	Factoring Company Account Ge Money Bank				1,200.00
Sheet no. <b>_6</b> of <b>_12</b> _ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Subt			3,653.33

In re	Dean Mitchell Holland	Case No	
_		Debtor	

9000 VIII 0 VIII	С	Ни	sband, Wife, Joint, or Community	С	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.		UZL-QU-DA	SPUTED	AMOUNT OF CLAIM
Account No. Hamilton Holland			Consumer Debt	T	D A T E		
Mount Ellis Academy 3641 Bozeman Trail Road Bozeman, MT 59715		-			D		299.60
Account No. 11670562	╁			+			233.00
National Enterprise System 29125 Solon Road Solon, OH 44139		-					
							12,558.40
Account No.  Olde Town Brokers, Inc 11 N. Summerlin Ave #101 Orlando, FL 32801		_					15,050.00
Account No. 7181160003208818  Online Collections Po Box 1489 Winterville, NC 28590	-	-	Opened 11/14/11 Last Active 7/01/11 Collection Attorney Orlando Utilities Co				544.00
Account No. 3806*1313026126  Palm Beach Pathology 8085 Rivers Avenue Suite 100 Charleston, SC 29406		_	Medical Debt				380.00
Sheet no7 of _12_ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Subt			28,832.00

In re	Dean Mitchell Holland	Case No.	
_		Dehtor	

	С	Нп	sband, Wife, Joint, or Community	С	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	N G E N	ONLIQUIDATE		AMOUNT OF CLAIM
Account No. RP13474			Medical Debt	Т	E		
Personal Pediatrics, PA 7051 Dr Phillips Blvd. Suite 1 Orlando, FL 32819-5140		-			D		182.21
Account No. 49X2918942			Medical	$\dagger$			
Piedmont Emergency P.O. Box 11647 Daytona Beach, FL 32120		-					30.00
Account No. <b>218804883</b>			1	$\perp$			30.00
Preston Mitchell Comp, LLC P.O. Box 457 Ruckersville, VA 22968		_	Loan				49,105.52
Account No. 1584			Medical Debt	$\dagger$			
Prime OBGYN, PA 1111 South Orange Avenue 4th Floor Orlando, FL 32806-1236		_					240.00
Account No. <b>1245627</b>	$\vdash$	$\vdash$	Opened 10/31/11 Last Active 5/01/11	+			
Professional Adjmnt Co 14410 Metropolis Ave Fort Myers, FL 33912		_	Collection Attorney West Orlando Er Phys				467.00
Sheet no. <b>8</b> of <b>12</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Subt			50,024.73

In re	Dean Mitchell Holland	Case No.	
_		Dehtor	

	C	н	sband, Wife, Joint, or Community	C	ш	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	I N G E N	DZLLGD_DKHE	SPUTED	AMOUNT OF CLAIM
Account No. 8659724011			Medical Debt	Т	T E		
Quest Diagnostics PO Box 7306 Hollister, MO 65673-7306		-			D		137.38
Account No. <b>4130502509</b>	╁						137.30
Rappahannoch Electric Coop P.O. Box 7388 Fredericksburg, VA 22404		-					
							60.00
Account No.	1						
Residences at Villa Medici		-					26 000 00
Account No. <b>10699</b>	+		Medical Debt				26,000.00
Rizzo Dental Group 6150 Metrowest Blvd. Suite 207 Orlando, FL 32835		-					488.60
Account No.	$\dagger$	$\vdash$	Medical				
Second Nature Blue Ridge LLC P.O. Box 809 Clayton, GA 30525		-					4,250.00
Sheet no. <b>9</b> of <b>12</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub			30,935.98

In re	Dean Mitchell Holland	Case No	
_		Debtor	

	С	Нп	sband, Wife, Joint, or Community	C	ш	р	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.		Q U	DISPUTED	AMOUNT OF CLAIM
Account No. HOLHA000				Ť	ΙE		
Stephan C. Wagner, PhD 321 E. Main St #205 Bozeman, MT 59715		-			D		756.00
Account No. 4488-4898-6018-8851	╁	┢	Credit Card	+	$\vdash$	-	
Suntrust Bank PO Box 4997 Orlando, FL 32802		-					9,296.53
Account No. <b>673219518</b>	╁	┢	Loan	+	$\vdash$		,
Suntrust Bank P.O. Box 85041 Phoenix, AZ 85041		-					47,333.53
Account No. <b>426-1727768</b>	╁		Consumer Debt	+			
TD Bank PO Box 84037 Columbus, GA 31908		-					938.55
Account No.	$\dagger$		Student Tuition	+	$\vdash$	$\vdash$	
The Covenant School 175 Hickory St Charlottesville, VA 22902		-					4,400.00
Sheet no. 10 of 12 sheets attached to Schedule of	_	_	1	Sub	tota	ıl	62.724.64
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	62,724.61

In re	Dean Mitchell Holland	Case No	
_		Debtor	

CDEDITODIS NAME	С	Hu	sband, Wife, Joint, or Community		С	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLA IS SUBJECT TO SETOFF, SO STATE.	IM	024-2682	DZGDG	-8 $P$ 1	AMOUNT OF CLAIM
Account No. 1634622			Medical		T	DATE		
The University of Virginia P.O. Box 105028 Charlottesville, VA 22906		-				D		00.00
Account No.	H							20.00
Thomas Hancher & Comp P.O. Box 948 Charlottesville, VA 22902		-						
								6,250.00
Account No. 25294718  Transworld Systems, Inc. 507 Prudential Road Horsham, PA 19044		-	Collection for Lori Lambert MD, LLC					269.92
Account No. 882-110527335641	t							
Univ Diag Institute P.O. Box 881564 Port Saint Lucie, FL 34988		-						1,509.00
Account No. <b>16431805</b>	$\dagger$		Opened 9/12/07 Last Active 11/18/11					
University Of Va Commu 3300 Berkmar Dr Charlottesville, VA 22901		-	Check Credit Or Line Of Credit					4,023.00
Sheet no. <u>11</u> of <u>12</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(То	S tal of th		ota		12,071.92

In re	Dean Mitchell Holland	,	Case No.
-		Debtor	

CREDITOR'S NAME,	C	Ηυ	sband, Wife, Joint, or Community	C	U	D		
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	QU	D I S P U T E D	-	AMOUNT OF CLAIM
Account No. V850V3			Business Debt		E			
UPS PO Box 42086 Philadelphia, PA 19101-2086		-			D			42.10
Account No. 4428255000019550	T		Opened 8/16/07 Last Active 6/01/10	T	T	T	†	
Uva Credit Union-A D 3300 Berkmar Dr Charlottesville, VA 22901		-	Credit Card					
								26,845.00
Account No. <b>021287049000001</b>	t	+		t	1	t	†	
Verizon Wireless P.O. Box 26055 Minneapolis, MN 55426		-						
								503.34
Account No. 0007234058	t		Business Debt			t	†	
Virginia Employment Comm. PO Box 27592 Richmond, VA 23261		-						
								729.18
Account No.	T	T		T		T	†	
Sheet no. <u>12</u> of <u>12</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Sub			,	28,119.62
- ,			,		Γota		t	
			(Report on Summary of So				, [	291,336.18

### Case 6:14-bk-13275-ABB Doc 1 Filed 12/05/14 Page 30 of 56

B6G (Official Form 6G) (12/07)

In re	Dean Mitchell Holland	Case No.	
-		Debtor	

## SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

### Case 6:14-bk-13275-ABB Doc 1 Filed 12/05/14 Page 31 of 56

B6H (Official Form 6H) (12/07)

In re	Dean Mitchell Holland	Case No	
-		, Debtor	

### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

							•				
	in this information										
Del	btor 1	Dean Mitche	II Holland								
_	btor 2 buse, if filing)										
Uni	ited States Bankrup	otcy Court for the	: MIDDLE DISTRICT C	F FLORIDA		_					
	se number								ed filing ent showin	g post-petition	
0	fficial Form	<u> B 6I</u>					N	MM / DD/ Y	YYY		
S	chedule I:	Your Inco	ome								12/13
sup spo atta	plying correct info use. If you are se ch a separate she	ormation. If you parated and you	sible. If two married peo are married and not fili r spouse is not filing w On the top of any additi	ng jointly, and you ith you, do not incl	r spouse i ude infori	is liv matic	ing with on abou	you, incl t your spo	ude inforr ouse. If m	nation about ore space is	your needed,
1.	Fill in your emp information.	loyment		Debtor 1				Debtor 2	or non-fi	iling spouse	
	If you have more attach a separate	e page with	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>				☐ Emplo	•		
	information abou employers.	it additional	Occupation	Occupation Self Employed							
	Include part-time self-employed wo		Employer's name	DBA Preston I	Mitchell (	Co.					
	Occupation may or homemaker, if		Employer's address	7147 Yatcht Ba #112 Orlando, FL 32		nue					
			How long employed t	here? 17 yea	ars						
Par	rt 2: Give De	etails About Mor	. ,	<u>,v.</u>							
Esti		ome as of the da	ate you file this form. If	you have nothing to	report for	any l	ine, write	e \$0 in the	space. In	clude your no	n-filing
	ou or your non-filing e space, attach a s		ore than one employer, co	ombine the informati	on for all e	emplo	oyers for	that perso	n on the li	nes below. If	you need
							For Del	btor 1		btor 2 or ing spouse	
2.			ry, and commissions (b calculate what the monthl		2.	\$		0.00	\$	N/A	
3.	Estimate and lis	st monthly overti	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross	Income. Add lin	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

Debt	tor 1	Dean Mitchell Holland	·	Cas	e number (if known)			
				Fo	or Debtor 1		ebtor 2 or	e
	Сор	y line 4 here	4.	\$	0.00	\$		<u>/A</u>
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N	/A
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$		/A
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/	/A
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/	<u>/A</u>
	5e.	Insurance	5e.	\$	0.00	\$	N/	<u>/A</u>
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/	/A
	5g.	Union dues	5g.	\$	0.00	\$	N/	/A
	5h.	Other deductions. Specify:	_ 5h.+	\$_	0.00	+ \$	N/	<u>/A</u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	N/	<u>/A</u>
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	N/	<u>/A</u>
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	3,500.00	\$	N	/A
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$		/A
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/	/A
	8e.	Social Security	8e.	\$	0.00	\$	N/	/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.	\$	0.00	\$	N	/A
	8g.	Pension or retirement income	<b>8</b> g.	\$	0.00	\$	N/	
	8h.	Other monthly income. Specify:	8h.+	\$		+ \$	N/	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3,500.00	\$	N	N/A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		3,500.00 + \$		<b>N/A</b> = \$	3,500.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your or friends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not a cify:	depend		•		hedule J. 11. +\$ _	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result in the summary of Schedules and Statistical Summary of Certain ies					12. \$	3,500.00
13.	Do y	ou expect an increase or decrease within the year after you file this form? No.	?					bined thly income
	_	Vos Evolain:						1

Fill	in this informa	ation to identify yo	our case.			1		
	otor 1	Dean Mitche		d		Ch	eck if this is: An amended filing	
	otor 2 ouse, if filing)						A supplement sho	wing post-petition chapter the following date:
Unit	ted States Bank	ruptcy Court for the	: MIDDLE	E DISTRICT OF FLORID	Α		MM / DD / YYYY	
	se number nown)						A separate filing for 2 maintains a separate	or Debtor 2 because Debtor arate household
_		orm B 6J	_ Exper	ises		-		12/13
Be info	as complete ormation. If n	and accurate as	possible.	If two married people chanother sheet to thi				
Par	t 1: Desc	ribe Your House	hold					
	■ No. Go to	o line 2. es Debtor 2 live	in a separ	ate household?				
	ΠY	es. Debtor 2 mus	st file a sep	parate Schedule J.				
2.	Do you hav	e dependents?	☐ No					
	Do not list D Debtor 2.	Debtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state dependents				Daughter		17	□ No ■ Yes □ No □ Yes □ No □ Yes □ No
3.	expenses of yourself an	penses include of people other t nd your depende	nts?	No Yes	; <del></del>		_	☐ Yes
Est exp	imate your e	a date after the	our bankrı	uptcy filing date unless	you are using this foplemental Schedule	orm as a s e <i>J</i> , check	supplement in a Chathe top of	apter 13 case to report of the form and fill in the
the		h assistance an		government assistance luded it on <i>Schedule I:</i>			Your exp	enses
4.		or home owners nd any rent for th		ses for your residence.	. Include first mortgag	e 4.	\$	500.00
	If not include	ded in line 4:						
		estate taxes erty, homeowner's	s, or renter	's insurance		4a. 4b.		0.00
		e maintenance, re eowner's associa		ipkeep expenses		4c. 4d.		0.00
5.				our residence, such as h	nome equity loans	4a. 5.		0.00 0.00

6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 100.00 6d. Other. Specify: Cable	Debtor 1	Dean Mitchell Holland	Case number (if known)	
6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6b. \$ 75.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 100.00 6d. Other. Specify: Cable Internet	6. <b>Utilit</b>	ries:		
6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, statilite, and cable services 6c. S 100.00 6d. Other. Specify: Cable 6d. \$ 40.00 Internet \$ 25.00 Food and housekeeping supplies 7. \$ 700.00 Childcare and children's education costs Childcare and children's education costs Clothing, laundry, and dry cleaning 9. \$ 100.00 Clothing, laundry, and dry cleaning 9. \$ 100.00 Tothing, laundry, and dry cleaning 9. \$ 100.00 Tothing laundry, and dry cleaning 9. \$ 100.00 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 25.00 Tothing laundry, and dry services Tothing, laundry, and dry services Tothing laundry and service			6a. \$	200 00
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Cable Internet Services 6d. Other. Specify: Cable Internet Services Food and housekeeping supplies 7. \$ 700.00 Childcare and children's education costs 8. \$ 100.00 Colothing, laundry, and dry cleaning 9. \$ 100.00 0. Personal care products and services 10. \$ 100.00 1. Medical and dental expenses 11. \$ 200.00 1. Medical and dental expenses 12. \$ 700.00 13. Charitable contributions and religious donations 14. \$ 25.00 15. Charitable contributions and religious donations 14. \$ 25.00 16. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. \$ 400.00 15c. Vehicle insurance 15d. Other insurance, specify: Dental 15d. Charitable care payments: 15d. Other insurance, specify: 16. \$ 0.00 17b. Care payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Cherr. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other specify: 19d. Services of the specific of the sp		,		
6d. Other. Specify: Cable   6d. \$   440.00   Internet   \$   \$   25.00   Food and housekeeping supplies   7. \$   700.00   Childcare and children's education costs   8. \$   100.00   Clothing, laundry, and ry cleaning   9. \$   100.00   Othersonal care products and services   10. \$   100.00   Othersonal care products and services   10. \$   100.00   Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books   13. \$   25.00   Othersonal contributions and religious donations   14. \$   25.00   Othersonal contributions and religious donations   14. \$   25.00   Othersonal contributions and religious donations   150. \$   0.00   Other insurance   150. \$   0.00   Other payments for Vehicle 1   17a. \$   0.00   Other payments for Vehicle 2   17b. \$   0.00   Other payments for Vehicle 2   17b. \$   0.00   Other payments of alimony, maintenance, and support that you did not report as deducted from your pay or line 5, Schedule 1, Your Income (Official Form 6I).   18. \$   0.00   Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 6I).   18. \$   0.00   Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income.  Other real property, homeowner's, or renter's insurance   200. \$   0.00   Other Payments of alimony, maintenance, and support others who do not live with you. \$   0.00   Other Payments of alimony, maintenance, and support others who do not live with you. \$   0.00   Other Payments of alimony, maintenance, and support others who do not live with you. \$   0.00   Other Payments of alimony, maintenance   200. \$   0.00   Other Payments of alimony, maintenance   200. \$   0.00   Other Payments o			· · · · · · · · · · · · · · · · · · ·	
Internet   \$ 25.00			· —	
Food and housekeeping supplies Childraer and children's education costs Clothing, laundry, and dry cleaning Personal care products and services 10. Personal care products and services 11. \$ 200.00 Personal care products and services 11. \$ 200.00 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 25.00 Lothing, services Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 25.00 Lothing insurance Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance Do not include insurance entertain services 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance entertain services entertain	ou.			
Childcare and children's education costs   8. \$   100.00   Clothing, laundry, and dry cleaning   9. \$   100.00   Personal care products and services   10. \$   100.00				
Clothing, laundry, and dry cleaning Personal care products and services 10. \$ 100.00 Nedical and dental expenses 11. \$ 200.00 11. Nedical and dental expenses 11. \$ 200.00 11. S 700.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 700.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 25.00 14. \$ 25.00 15. Charitable contributions and religious donations 14. \$ 25.00 15a. Life insurance Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. S 150.00 15b. Health insurance 15c. S 400.00 15c. Vehicle insurance 15c. S 400.00 15c. Vehicle insurance 15c. S 400.00 15c. Vehicle insurance 15d. S 400.00 15d. Other insurance. Specify: Dental 15d. S 400.00 15d. Other insurance. Specify: Dental 15d. S 400.00 15d. Other insurance specify: Dental 15d. S 400.00 15d. Other specify: 17d. S 0.00 17d. Other. Specify: 17d. S 0.00 17d. Other s			·	
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1. Medical and dental expenses 2. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 3. Entertainment, clubs, recreation, newspapers, magazines, and books 3. \$ 25.00 Charitable contributions and religious donations 5. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance, Specify: Dental 15c. Other insurance, Specify: Dental 15d. Other insurance, Specify: Dental 15d. S 400.00 15d. Other insurance, Specify: Dental 15d. S 400.00 15d. Other insurance, Specify: Dental 15d. S 400.00 15d. Other insurance, Specify: Dental 17a. Car payments for Vehicle 1 17a. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other, Specify: 17c. Specify: 17c. Specify: 17c. Specify: 17d. S 0.00 17d. Other, Specify: 17d. S 0.00 17d. Other, Specify: 17d. S 0.00 17d. Other payments of altimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 61). 18d. S 0.00 19d. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses from your morthly necome. 21a. Copy your mont	. Cloth	hing, laundry, and dry cleaning	9. \$	100.00
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Explain:				

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B6 Declaration (Official Form 6 - Declaration). (12/07)

## **United States Bankruptcy Court**Middle District of Florida

In re	Dean Mitchell Holland			Case No.						
			Debtor(s)	Chapter	13					
	DECLARATION CONCERNING DEBTOR'S SCHEDULES									
DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR										
	I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of30									
	sheets, and that they are true and correct to t	the best of m	y knowledge, information	, and belief.						
Date	December 5, 2014	Signature	/s/ Dean Mitchell Hollar	nd						
			Dean Mitchell Holland							
			Debtor							

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

# United States Bankruptcy Court Middle District of Florida

In re	Dean Mitchell Holland			
		Debtor(s)	Chapter	13

### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

## 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE \$38,500.00 2014 YTD: \$32,103.00 2013

### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

2

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
DATES OF PAID OR
PAYMENTS/ VALUE OF
TRANSFERS TRANSFERS

NAME AND ADDRESS OF CREDITOR

VALUE OF AMOUNT STILL TRANSFERS OWING

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

3

# 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF

PROPERTY

#### 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR. IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

## 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Roberts & Robold, P.A. 131 Park Lake Street Orlando, FL 32803 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$3,500.00 and a \$310.00 filing
fee

4

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED
AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

# 15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF **ENVIRONMENTAL** DATE OF SITE NAME AND ADDRESS GOVERNMENTAL UNIT LAW NOTICE

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF **ENVIRONMENTAL** DATE OF SITE NAME AND ADDRESS GOVERNMENTAL UNIT **NOTICE** LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None П

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six **vears** immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

(ITIN)/ COMPLETE EIN

**ADDRESS** 

NATURE OF BUSINESS

**BEGINNING AND ENDING DATES** 

**Preston Mitchell** Company, LLC

20-4042479

7147 Yacht Basin Avenue Orlando, FL 32835

1997-Present

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

**ADDRESS** 

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME **ADDRESS** 

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within two years immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

7

#### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

**ADDRESS** 

DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

#### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

#### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

8

# 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\* \* \* \* \* \*

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date December 5, 2014
Signature /s/ Dean Mitchell Holland
Dean Mitchell Holland
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

# UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF FLORIDA

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

# 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

# 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

# Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the

Page 2

## Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

# Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

# Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

# 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

B 201B (Form 201B) (12/09)

# United States Bankruptcy Court Middle District of Florida

	Middle D	istrict	of Florida		
In re	Dean Mitchell Holland		Case No.		
		Debt	or(s) Chapter	13	
	CERTIFICATION OF NOTI UNDER § 342(b) OF T		O CONSUMER DEBTOR SANKRUPTCY CODE	k(S)	
Code.	Certifica I (We), the debtor(s), affirm that I (we) have received a		f Debtor If the attached notice, as required	oy § 34:	2(b) of the Bankruptcy
Dean	Mitchell Holland	X	/s/ Dean Mitchell Holland		December 5, 2014
Printe	d Name(s) of Debtor(s)		Signature of Debtor		Date
Case N	No. (if known)	X			
			Signature of Joint Debtor (if any	)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

# United States Bankruptcy Court Middle District of Florida

Case No.	
Chapter	13
ITOR MATRIX	
true and correct to the best	of his/her knowledge.
lland	
	olland nd

Signature of Debtor

Beacon Health Central Virginia Oral Dean Mitchell Holland 2051 Hamill Rd and Facial 7147 Yacht Basin Avenue 244 Hydraulic Ridge Road #112 #301 Charlottesville, VA 22901-8124 Hixson, TN 37343 Orlando, FL 32835 David L. Robold, Esq. Blockbuster Charlottesville Bureau Roberts & Robold, P.A. PO Box 461028 3690 Dobleann Dr 131 Park Lake Street Papillion, NE 68046 Charlottesville, VA 22911 Orlando, FL 32803 Accent Bud Treakle, Attorney at Law Charlottesville Gastero Assc 7171 Mercy Rd 700 E High St 1139 E. High St #203 Charlottesville, VA 22902 Omaha, NE 68106 Charlottesville, VA 22902 Advanta Bank Corp Business Revenue Syste Credit Protection Asso P.O. Box 8088 2419 Spy Run Ave Ste A 13355 Noel Rd Ste 2100 Fort Wayne, IN 46805 Philadelphia, PA 19101 Dallas, TX 75240 Ameripath Florida, LLC Business Revenue Systems David Dalley. DDS 16684 Collections Center Dri 2419 Spy Ran Ave. 901 Preston Ave Fort Wayne, IN 46805-3258 Chicago, IL 60693 #200 Charlottesville, VA 22903 ARS National Services, Inc Cach. Llc Discover Financial Services 4340 S Monaco St Unit 2 PO Box 463023 PO Box 153116 Escondido, CA 93046-0765 Denver, CO 80237 Wilmington, DE 19850 Bank of America Cap One EOS CCA P.O. Box 982235 Po Box 85520 700 Longwater Drive El Paso, TX 79998 Richmond, VA 23285 Norwell, MA 02061 Bank of America Capital Management Service First Source Advantage 726 Exchange Street 205 Bryant Wood South P.O Box 982235 Churchville, NY 14428 # 700 El Paso, TX 79998 Buffalo, NY 14210 Bank of America Central Florida Behavioral Florida Department of Transp

Healthcare, PLLC

Suite 16

7350 Futures Drive

Orlando, FL 32819

Violation Enforcement Sec

PO Box 105477

Atlanta, GA 30348

P.O. Box 15796

Wilmington, DE 19886

Fredericksburg Cr Bur Keiter Stephans Hurst Gray Midland Funding 210 Ridge McIntire Rd 10506 Wakeman Dr 8875 Aero Dr Ste 200 Fredericksburg, VA 22407 Charlottesville, VA 22903 San Diego, CA 92123 GE Capitol Sams Club Laboratory Corp of America Miracle Financial Inc. P.O. Box 965005 P.O. Box 2240 53 Armstrong Rd. Burlington, NC 27216 Orlando, FL 32896 Plymouth, MA 02360 Gecrb/Lowes LTD Financial Services MKB Production Po Box 965005 PO Box 630769 2813 Tangelo Drive Orlando, FL 32896 Houston, TX 77263-0769 Sarasota, FL 34239 Gillum Architects, P.C Maple Run Enterprises Mount Ellis Academy P.O. Box 830 109 Bearfield 3641 Bozeman Trail Road Bozeman, MT 59715 Orange, VA 22960 Amherst, VA 24521 Health Central Mara Roth MSW Captical LLC P.O. Box 15298 1000 W. Colonial Drive 2813 Tangelo Drive Ocoee, FL 34761 Sarasota, FL 34239 Wilmington, DE 19850 Health Central Ambulance MCB Collection Service **NAFS** PO Box 9109083 134 S Tampa St P.O. Box 9027 Tampa, FL 33602 Orlando, FL 32891 Williamsville, NY 14231-9027 Internal Revenue Service Medical Center Radiology National Enterprise System PO Box 660169 20 W Kaley Street 29125 Solon Road Dallas, TX 75266-0169 Orlando, FL 32806 Solon, OH 44139 Merchants Assoc. Collections Nationwide Credit Jackson Hewitt 2221 Lee Road P.O. Box 972 2002 Summit Blvd. Oviedo, FL 32766 Tampa, FL 33602 Atlanta, GA 30319-1559 JP Morgan Chase NCO Financial Merchantscol Po Box 15298 2066 14 Ave #102 507 Prudential Road

Vero Beach, FL 32960

Horsham, PA 19044

Wilmington, DE 19850

Neal Walters Scott & Kroner Portfolio Recovery Associate Rubenstein and Cogan 210 Ride-McIntire PO Box 12914 12 S Summit Ave Norfolk, VA 23541 Charlottesville, VA 22903 Gaithersburg, MD 20877 Scott & Kroner, Attorney's Neal Walters Scott & Kroner Preston Mitchell Comp, LLC 418 E Water St P.O. Box 457 210 Ridge McIntire Rd Charlottesville, VA 22902 Ruckersville, VA 22968 Charlottesville, VA 22903 Olde Town Brokers, Inc Prime OBGYN, PA Second Nature Blue Ridge LLC 11 N. Summerlin Ave 1111 South Orange Avenue P.O. Box 809 #101 4th Floor Clayton, GA 30525 Orlando, FL 32806-1236 Orlando, FL 32801 Stephan C. Wagner, PhD Online Collections Professional Adjmnt Co Po Box 1489 14410 Metropolis Ave 321 E. Main St #205 Winterville, NC 28590 Fort Myers, FL 33912 Bozeman, MT 59715 Orange County VA **Ouest Diagnostics** Suntrust Bank P.O. Box 469 PO Box 7306 PO Box 4997 Orange, VA 22960 Hollister, MO 65673-7306 Orlando, FL 32802 OUC Rappahannoch Electric Coop Suntrust Bank 100 W Anderson St P.O. Box 7388 P.O. Box 85041 Orlando, FL 32801 Fredericksburg, VA 22404 Phoenix, AZ 85041 Palm Beach Pathology Residences at Villa Medici Suntrust Bank 8085 Rivers Avenue PO Box 918497 Orlando, FL 32891 Suite 100 Charleston, SC 29406 Personal Pediatrics, PA Rizzo Dental Group TD Bank 7051 Dr Phillips Blvd. 6150 Metrowest Blvd. PO Box 84037 Suite 1 Suite 207 Columbus, GA 31908 Orlando, FL 32819-5140 Orlando, FL 32835 Piedmont Emergency Robert W. Anthony, ESQ The Covenant School

1325 Colonial Dr

Orlando, FL 32804

P.O. Box 11647

Daytona Beach, FL 32120

175 Hickory St

Charlottesville, VA 22902

The University of Virginia P.O. Box 105028 Charlottesville, VA 22906 Virginia Department of Taxat PO Box 1115 Richmond, VA 23218

Thomas Hancher & Comp P.O. Box 948 Charlottesville, VA 22902 Virginia Employment Comm. PO Box 27592 Richmond, VA 23261

Transworld Systems, Inc. 507 Prudential Road Horsham, PA 19044

West Orlando ER PO Box 917156 Orlando, FL 32891

United Consumers, Inc. PO Box 4466 Woodbridge, VA 22194-4466 Zakheim & Assoc 1045 S. University Drive Suite 202 Fort Lauderdale, FL 33324

Univ Diag Institute P.O. Box 881564 Port Saint Lucie, FL 34988

University Of Va Commu 3300 Berkmar Dr Charlottesville, VA 22901

UPS PO Box 42086 Philadelphia, PA 19101-2086

Uva Credit Union-A D 3300 Berkmar Dr Charlottesville, VA 22901

Verizon Wireless P.O. Box 26055 Minneapolis, MN 55426

# United States Bankruptcy Court Middle District of Florida

In re	Dean Mitchell Holland		Case No.	
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENSA	ATION OF ATTO	ORNEY FOR DE	EBTOR(S)
p	tursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), aid to me within one year before the filing of the petition in lehalf of the debtor(s) in contemplation of or in connection w	bankruptcy, or agreed to	be paid to me, for serv	
	For legal services, I have agreed to accept		\$	3,500.00
	For Additional Services-Monthly Monitoring Fee		\$	1,300.00
	For Additional Services-Mortgage Modification/Mediation	on	\$	0.00
	Prior to the filing of this statement I have received		\$	3,500.00
	TOTAL BALANCE DUE IN ATTORNEYS FEES		\$	1,300.00
2. Т	The source of the compensation paid to me was:  Debtor  Other (specify):			
3. Т	The source of compensation to be paid to me is:  Debtor  Other (specify):			
4.	I have not agreed to share the above-disclosed compensat	ion with any other perso	on unless they are mem	bers and associates of my law firm.
	I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names o			
5. I	n return for the above-disclosed fee, I have agreed to render	legal service for all aspe	ects of the bankruptcy of	case, including:
	Representation of the debtor in adversary proceedings and [Other provisions as needed]	other contested bankru	ptcy matters;	
6. E	sy agreement with the debtor(s), the above-disclosed fee does	s not include the followi	ing service:	
	CI	ERTIFICATION		
	certify that the foregoing is a complete statement of any agreankruptcy proceeding.	eement or arrangement f	for payment to me for r	epresentation of the debtor(s) in
Dated	December 5, 2014		d, Esq. old, P.A. Street	n

Fill in this information to identify your case:						
Debtor 1 Dean Mitchell Hol	land					
Debtor 2 (Spouse, if filing)						
United States Bankruptcy Court for the	e: Middle District of Florida					
Case number (if known)						

Acc	Check as directed in lines 17 and 21:  According to the calculations required by this Statement:  1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3)				
•	•				
	Disposable income is determined under 11 U.S.C. § 1325(b)(3)				
	3. The commitment period is 3 years.				
	4. The commitment period is 5 years.				

☐ Check if this is an amended filing

# Official Form 22C-1

# Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/14

as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

# Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
  - Not married. Fill out Column A, lines 2-11.
  - ☐ Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

od have nothing to report for any line, write to in the space.	
	Column A Column B Debtor 1 Debtor 2 or non-filing spouse
Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$\$
<b>Alimony and maintenance payments.</b> Do not include payments from a spouse if Column B is filled in.	\$\$
All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	
Net income from operating a business, profession, or farm	
Gross receipts (before all deductions) \$ 0.00	
Ordinary and necessary operating expenses -\$ 0.00	
Net monthly income from a business, profession, or farm \$ 0.00 Copy here -	>\$
Net income from rental and other real property  Gross receipts (before all deductions) \$ 0.00  Ordinary and necessary operating expenses -\$ 0.00	
Net monthly income from rental or other real property \$ 0.00 Copy here -:	>\$

Official Form 22C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor	Dean Mitchell Holland		Case number	(if known)			
			Column A Debtor 1		Column B Debtor 2 or non-filing s	pouse	
7. <b>I</b>	Interest, dividends, and royalties		\$	0.00	\$		
	Unemployment compensation		\$	0.00	\$		
	Do not enter the amount if you contend that the amount received was a bithe Social Security Act. Instead, list it here:	enefit under					
	For you \$ For your spouse \$	0.00					
k	<b>Pension or retirement income.</b> Do not include any amount received that benefit under the Social Security Act.		\$	0.00	\$		
[ r	Income from all other sources not listed above. Specify the source an Do not include any benefits received under the Social Security Act or pay received as a victim of a war crime, a crime against humanity, or internation domestic terrorism. If necessary, list other sources on a separate page ar total on line 10c.	ments onal or					
	10a		\$	0.00	\$		
	10b		\$	0.00	\$		
	10c. Total amounts from separate pages, if any.	+	\$	0.00	\$		
	Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	s	3,500.00	+		=[	3,500.00
					<u>_</u>		tal average onthly income
Part 2	Determine How to Measure Your Deductions from Income						
12. <b>(</b> 13. <b>(</b>	Copy your total average monthly income from line 11.  Calculate the marital adjustment. Check one:  You are not married. Fill in \$0 on line 3d.					\$	3,500.00
	☐ You are married and your spouse is filing with you. Fill in 0 in line 13	d					
_	☐ You are married and your spouse is not filing with you.	u.					
•	Fill in the amount of the income listed in line 11, Column B, that was dependents, such as payment of the spouse's tax liability or the spouse						
	In line 13a-c, specify the basis for excluding this income and the ame adjustments on a separate page.	ount of incor	me devoted to	each pu	rpose. If neces	sary, lis	st additional
	If this adjustment does not apply, enter 0 on line 13d.						
	13a.	\$		_			
	13b	\$_		_			
	13c	<del>+</del> \$					
	13d. Total	\$	0.00	Cor	by here=> 13d.		0.00
14.	Your current monthly income. Subtract line 13d from line 12.				14.	\$	3,500.00
15.	Calculate your current monthly income for the year. Follow these st	eps:					
	15a. Copy line 14 here=>				15a.	\$	3,500.00
							40
	Multiply line 15a by 12 (the number of months in a year)					X	12
	15b. The result is your current monthly income for the year for this part	of the form			15b.	\$	42,000.00

Debto	or 1	Dean	Mitchell Holland		Case number (if known)			
16	Calc	ulate	the median family income that applies to	you. Follow these step	os:			
	16a.	Fill in	the state in which you live.	FL				
	16b.	Fill in	the number of people in your household.	2				
	16c.	Fill in	the median family income for your state and	size of household.		16c.	\$	51,584.00
			d a list of applicable median income amount ctions for this form. This list may also be ava	s, go online using the	link specified in the separate	100.	Ψ_	
17.	How	do th	e lines compare?		•			
	17a.		Line 15b is less than or equal to line 16c. 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do					determined under
	17b.		Line 15b is more than line 16c. On the top 1325(b)(3). <b>Go to Part 3 and fill out Calc</b> current monthly income from line 14 above	ulation of Disposable				
Part	3:	Cal	culate Your Commitment Period Under 11	U.S.C. §1325(b)(4)				
18.	Сор	y your	total average monthly income from line	11 .		18.	\$	3,500.00
	Ded	uct the	e marital adjustment if it applies. If you are at calculating the commitment period under acome, copy the amount from line 13d.	e married, your spouse	e is not filing with you, and you			
	If the	marit	al adjustment does not apply, fill in 0 on line	19a.		19a. <b>-</b>	\$	0.00
	Sub	tract li	ne 19a from line 18.			19b.	\$	3,500.00
20	Calc	ulato	your current monthly income for the year	· Follow these stens:				
20.			line 40h hans	•		20a.	Ф.	3,500.00
	20a.						Ψ_	. 10
		wuitip	ly by 12 (the number of months in a year).					x 12
	20b.	The re	esult is current monthly income for the year f	or this part of the form		20b.	\$_	42,000.00
							<u> </u>	
	20c.	Сору	the median family income for your state and	size of household from	m line 16c	-	\$_	51,584.00
	21.	How	do the lines compare?					
		<b>.</b>	ine 20b is less than line 20c. Unless otherw	rise ordered by the cou	urt, on the top of page 1 of this form	check	hox 3.	The commitment
			period is 3 years. Go to Part 4.	iso ordered by the ood	in, on the top of page 1 of the form	, or look	оох о,	THO COMMINATION
			Line 20b is more than or equal to line 20c. Uncommitment period is 5 years. Go to Part 4.	nless otherwise ordere	ed by the court, on the top of page	of this	form, c	heck box 4, <i>The</i>
Pari	4:	Sigi	n Below					
	By s	igning	here, under penalty of perjury I declare that	the information on this	statement and in any attachments	is true a	and cor	rect.
×	z Isl	Dean	Mitchell Holland					
•	De	an Mi	tchell Holland					
	·		of Debtor 1  ember 5, 2014					
	_ 0.0		/DD /YYYY					
	•		ked line 17a, do NOT fill out or file Form 220					
	If you	u chec	ked line 17b, fill out Form 22C-2 and file it w	ith this form. On line 3	9 of that form, copy your current me	onthly in	come f	rom line 14 above.